


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 03, 2008 08:00 A
Secretary of State**

DOCUMENT # P05000087145

1. Entity Name
LA AMERICA SEAFOOD, INC



Principal Place of Business Mailing Address

12434 NW 38TH AVE 12434 NW 38TH AVE
OPA LOCKA, FL 33054 OPA LOCKA, FL 33054

DO NOT WRITE IN THIS SPACE



02042008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-3026990 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIAZ, ARELIS
9360 SW 72 STREET
SUITE 232
MIAMI, FL 33173

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

U00000844984
03/13/08-80021-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	AMARO, RAMON
STREET ADDRESS	9360 SW 72 STREET SUITE 232
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	V
NAME	PEREZ, JESUS
STREET ADDRESS	2481 W. 60 PL
CITY-ST-ZIP	HIALEAH, FL 33016
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  02/28/08 305-6896182

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #